

TANGIPAOA PARISH SCHOOL SYSTEM

SCHOOL BUS ROUTE INFORMATION REPORT

Bus # _____

This report requires the school bus driver to gather and report school bus route information in three important areas: Route mileage, pupils transported, and route starting and ending times. Information must be reported as soon as possible after the beginning of the school year. Bus driver please be sure that the reported information is accurate, true and correct. This information will be used to obtain State Funding for your route. Read and follow instructions carefully.

Name: _____ Address: _____

<u>SCHOOL BUS & DRIVER</u>	SOCIAL SECURITY NUMBER _____
	ASSIGNED SCHOOL _____
	HOME PHONE NUMBER _____
	PASSENGER CAPACITY _____ MAKE AND YEAR _____
	DATE OF PURCHASE _____ BODY _____
	VIN # _____

MILEAGE Use odometer readings only (show miles and tenths). Include only route mileage actually driven (no deadhead miles). Route mileage will be measured in the school bus (owner is responsible for verifying odometer accuracy).

FROZEN MILEAGE _____ EXPIRES _____

MILEAGE CHANGE Date this mileage began _____

MORNING	1. First Child Mileage _____	
ODOMETER	(ODOMETER READING)	_____
READING	2. Last School Mileage _____	LEAVE BLANK
	(ODOMETER READING)	
AFTERNOON	1. First School Mileage _____	
ODOMETER	(ODOMETER READING)	_____
READING	2. Last Child Mileage _____	LEAVE BLANK
	(ODOMETER READING)	

Vehicle used for mileage check: _____
(Year) (Make) (Model)

STUDENTS MUST NOT BE UNLOADED AT SCHOOL BEFORE DUTY TEACHERS ARE PRESENT.

<u>Route 1</u>	<u>MORNING</u>				<u>AFTERNOON</u>			
SCHOOL NAME	TIME	NO. OF STUDENTS	PUBLIC	NON-PUBLIC	TIME	NO. OF STUDENTS	PUBLIC	NON-PUBLIC
1 st								
2 nd								
3 rd								
4 th								
5 th								

<u>Route 2</u>	<u>MORNING</u>				<u>AFTERNOON</u>			
SCHOOL NAME	TIME	NO. OF STUDENTS	PUBLIC	NON-PUBLIC	TIME	NO. OF STUDENTS	PUBLIC	NON-PUBLIC
1 st								
2 nd								
3 rd								
4 th								
5 th								

ROUTE TIMES

MORNING ROUTE 1. TIME FIRST CHILD PICKED UP _____

2. TIME ARRIVED AT LAST SCHOOL _____

AFTERNOON ROUTE 1. TIME ARRIVED AT FIRST SCHOOL _____

2. TIME LAST CHILD DROPPED OFF _____

TOTAL NUMBER OF BUS STOPS (Include stops at school): _____
(AM) (PM)

DATE _____ DRIVER'S SIGNATURE _____